

Name \_\_\_\_\_ Today's Date \_\_\_\_\_

*Pregnancy*     *Pregnancy loss*     *Postpartum* \_\_\_\_\_ days / wks / months

**Please circle the answer which comes closest to how you have felt in the past 7 days**

1. I have been able to laugh and see the funny side of things.  
0 As much as I always could  
1 Not quite so much now  
2 Not so much now  
3 Not at all
2. I have looked forward with enjoyment to things.  
0 As much as I ever did  
1 Somewhat less than I used to  
2 A lot less than I used to  
3 Hardly at all
3. I have blamed myself unnecessarily when things went wrong.  
0 No, not at all  
1 Hardly ever  
2 Yes, sometimes  
3 Yes, very often
4. I have been anxious or worried for no good reason.  
3 Yes, often  
2 Yes, sometimes  
1 No, not much  
0 No, not at all
5. I have felt scared or panicky for no good reason.  
3 Yes, often  
2 Yes, sometimes  
1 No, not much  
0 No, not at all
6. Things have been too much for me.  
3 Yes, most of the time I haven't been able to cope at all  
2 Yes, sometimes I haven't been coping as well as usual  
1 No, most of the time I have coped well  
0 No, I have been coping as well as ever
7. I have been so unhappy that I have had difficulty sleeping.  
3 Yes, most of the time  
2 Yes, sometimes  
1 Not very often  
0 No, not at all
8. I have felt sad or miserable  
3 Yes, most of the time  
2 Yes, quite often  
1 Not very often  
0 No, not at all
9. I have been so unhappy that I have been crying.  
3 Yes, most of the time  
2 Yes, quite often  
1 Only occasionally  
0 No, never
10. The thought of harming myself has occurred to me.  
3 Yes, quite often  
2 Sometimes  
1 Hardly ever  
0 Never

**TOTAL SCORE:** \_\_\_\_\_

Initial screening     Follow-up screening

### Scoring:

A score of 10 may require a repeat assessment, as depression symptoms *may* be present. A score of 12 indicates that depression is likely and further assessment by a trained healthcare provider is recommended. If any number other than "0" is circled for item number 10, further assessment is required right away. Please contact your healthcare provider immediately.

The EPDS is an assessment tool and should not override clinical judgment. A comprehensive clinical assessment should confirm the diagnosis.

Edinburgh Postnatal Depression Scale (EPDS)  
(J.L. Cox, J.M. Holden, R. Sagovsky, Department of Psychiatry,  
University of Edinburgh)